



ProAction Cops & Kids Hamilton Program Application

MISSION: We believe that establishing a positive relationship between cops and kids at risk will strengthen our community today and for the future. By funding programs that bring cops and kids together, we help create an environment that promotes mutual understanding and respect.

INSTRUCTIONS & APPROVAL PROCESS:

1. Requests should be submitted at least **TWO MONTHS** in advance of when program funding is needed– It takes one month to receive, review, deliberate, approve or decline funding and have a cheque issued to HPS Finance Services.
2. Fill out the application to its entirety and submit the application to Superintendent Martin Schulenberg, Hamilton Police Service – ProAction’s Police Liaison.
3. After review, the Hamilton Police Liaison will forward the application to ProAction’s staff. The application will then be processed and sent to the Grants Committee for review.
4. Applicants will be notified by email if the Application has been Approved or Declined and a cheque will generally be issued to HPS Finance Services within a month of receiving the application.

FUNDING CRITERIA AND REQUIREMENTS

1. Applicants must be an officer of the Hamilton Police Service and the youth must reside within the City of Hamilton.
2. Programs must be developed, managed, and driven by officers. Police officers may partner with community agencies or schools who may provide administrative support, referrals to youth, etc. If a program is initiated by a school or community agency with fundraising capacity and run by the police, ProAction will consider matching the funds provided by the school or community agency. Funds eligible for matching grants exclude in-kind donations (i.e. facilities, salaries, honourariums, etc.)
3. Programs must influence youth who are at risk, in the short or long term, from developing an undesirable lifestyle and help to promote pro-social attitudes through skills development, positive social interaction, mentoring, etc.
4. ProAction funds programs that take place within the province of Ontario.
5. Grants may cover costs such as facility rentals, equipment, snacks, awards, materials, and fees for youth and Hamilton Police officers to take part in programs. ProAction does not normally fund salaries, honourariums, administration, or compensation for individuals – police or civilian. Capital equipment funding will only be considered for programs clearly initiated and managed by officers and where the equipment will remain property of the police.
6. Police-initiated one-day events (i.e. Division picnics, open houses, etc.) are normally eligible for up to \$1000 in funding.

REQUIRED PROGRAM FOLLOW-UP

Program officers must complete & forward a copy of the program report with all receipts as well as digital photographs (with release forms) and any media coverage of the program to ProAction within one month of the program end date. Please forward a copy of the program report, all receipts, and any left-over funds to HPS Finance Services as well so they can issue the refund back to ProAction. Please note that consideration for future funding will depend on the timely submission of program reports.

FEEL FREE TO CONTACT FOR ANY QUESTIONS OR IDEAS

Grants Programs

ProAction Cops & Kids - 40 College Street, 6th Floor, Toronto, ON M5G 2J3 Tel. 416-222-7011



ProAction Cops & Kids Hamilton Program Application

Officer Name:	Rank:	
Badge #:	Unit / Division:	
Direct Phone #:	E-mail:	
Signature:	Date:	

Program/Event Information

Name of Program:							
Type of Program:	Virtual	Hybrid	In Person				
Start Date:			End Date:				
DD-MMM-YY (eg. 01-Sep-11)							
Frequency:		Day(s) of Week:		Start Time:			
			Su M Tu W Th F Sa	End Time:			
Location: (complete address)							
Youth Participants per Session:		Police Participants per Session:					
Total Youth Participants for Program:		Total Police Participants for Program:					

Amount Requested:

NOTE: — DO NOT COMPLETE THIS LINE —
The amount will be filled-in automatically after
you complete the program budget in Section D

Note: Grants for one day events are limited up to \$1,000.00

Hamilton Police Service, Police Liaison – Review (Required)

Comments: _____

Signature: _____ Date: _____

Grant Approval – ProAction Cops & Kids (Office Use Only)

Approve: _____	Decline: _____	Amount Approved: _____
Comments: _____		
Signature: _____ Date: _____		

Section A: The Program

1. What is your motivation for running this program? What need will it address?
2. Please describe the activities that will take place during the program. What will a typical session entail?
3. Will your program teach/provide youth any of the following skills? (check all that apply)

Cooking/Food Nutrition	<input type="checkbox"/>	Financial Literacy	<input type="checkbox"/>	Stress Management	<input type="checkbox"/>	Cover Letter & Resume Writing	<input type="checkbox"/>	Digital Citizenship	<input type="checkbox"/>
Networking	<input type="checkbox"/>	Problem-solving	<input type="checkbox"/>	Communication skills	<input type="checkbox"/>	Time Management	<input type="checkbox"/>	Job Interview Skills	<input type="checkbox"/>
Other: (please provide details)									

4. Will your program provide youth with any of the following certifications? (check all that apply)

First Aid	<input type="checkbox"/>	Wilderness/ORCKA	<input type="checkbox"/>	Food Handling	<input type="checkbox"/>	Swimming/Water Safety	<input type="checkbox"/>	Lifeguarding	<input type="checkbox"/>
CPR	<input type="checkbox"/>	Basic Life Support (BLS)	<input type="checkbox"/>	AED	<input type="checkbox"/>	Babysitting	<input type="checkbox"/>	Naloxone Administration	<input type="checkbox"/>
Other: (please provide details)									

5. What role will the officers play during the program and how will officers interact with the youth?

6. Please describe how police will follow up and stay in touch with the youth:

7. Does the program have a religious aspect? If so, will youth be informed prior to the start of the program?

8. Please describe in detail the COVID safety plan that will be implemented during the program to ensure the health and safety of all participants:

Section B: The Youth

1. Please describe the youth for which this event/program is being run.

Age Range: _____ Gender: _____
2. What high priority neighbourhood or hot spot are the kids from?

3. Are there specific issues facing the youth?

4. Are you the parent or guardian of a child who is involved in this program? Yes: No:

5. How will youth be identified (*e.g. educators, community workers, probation officer*) and become involved? (*E.g. drop-in; sign up in advance*)

Section C: Community Partners

1. a) Are any community agencies, schools, businesses, or others involved? Yes: No:
- b) If so, please identify the partner(s) and their role before, during and after your program?

Partner	Contact Name/Phone#	Role	Details of Contribution

2. a) ProAction Cops & Kids encourages you to seek media attention for your program as all ProAction funding is raised from private donors. The more donors hear about your program in media, the more likely it is they will continue to support ProAction. Please ensure that ProAction's role in supporting your program is part of your message and that any and all of your partners fully understand ProAction's recognition guidelines. ProAction is happy to support your media effort, please contact us.

- b) Do you, or any of your partners in the program, intend to seek media attention for your program?

Yes: No:

- c) Does or will your program have a social media presence via Facebook, Twitter, Instagram, or TikTok?

If yes, please provide details below of all accounts that will be used to post information about this program — this includes accounts set up specifically for the program itself, or set up more generally at the Division level or in the name(s) of the Officers involved.

Instagram Account(s):	
Twitter Account(s):	
Facebook Account(s):	
TikTok Account(s):	

Section D: Budget

1. Please list the budgetary items on this form. Feel free to contact ProAction's staff should you require assistance. Please note that supplementary applications for additional funding beyond the original application are not normally accepted:

(Should you require more than 12 lines, please attach an appendix to the back of this form.)

Item	Units	Cost per Unit Including 13 %Tax	Total Cost
Total Budget:			
Funding received from other sources:			
Total Budget Less Other Funding:			

2. If this project was held before, what was the total budget and how was it funded?
Final Expenses (Estimate):

Funding Source	Amount

The Cheque and a copy of the application will be sent to HPS Finance Services. Please contact HPS Finance Services to arrange for the cheque to be released to you.

Thank you!